

POSITION	INITIALS	ID NO.	DATE
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**FEE DETERMINATION****O.I.P.E. CLASSIFIER****FORMALITY REVIEW****RESPONSE FORMALITY REVIEW****INDEX OF CLAIMS**

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral)... Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	
1	1/2
2	2/2
3	3/2
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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